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ox ISSUE FEE Assistant Commissioner for Patents Washington, D.C. 20231

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,				4.0		(Depositor's name)
APPLICATION NO.	FILING DATE	r		16		(Signature)
08/900,561		TOTAL CLAIM	IS	EXAMINED AND COO.		(Date)
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First Named KELDERMA	N.	GA	RY L.			3612 04/28/98
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ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) name will be printed. PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for (A) NAME OF ASSIGNEE

AgTracks, Inc.

B) RESIDENCE: (CITY & STATE OR COUNTRY)

Mt. Vernon, IN

*lease check the appropriate assignee category indicated below (will not be printed on the patent)

corporation or other private group entity

4a. The following fees are enclosed (make check payable to Commissioner Issue Fee

10

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COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above. (Date)

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